

**NEW MOON RABBIT RESCUE
FOSTERING APPLICATION**

First Name: _____ Last Name: _____
Year of Birth: _____
Address: _____
City: _____ Province: _____ Postal Code: _____
Daytime Phone: _____ Evening Phone: _____
Email Address: _____

1. Have you read and agree to the terms of the “Fostering For New Moon” document?
- Yes
 - No

If you have not read this document, please do so prior to filling out this application.
To view this document please visit our website at
http://www.newmoonrabbitrescue.ca/help_us/foster.php or email us at
foster@newmoonrabbitrescue.ca and request a copy.

2. Do you currently:
- Rent
 - Own
 - Other: _____

3. If renting, does your agreement permit the keeping of pets? Please note that New Moon Rabbit Rescue may request a signed letter from your landlord.
- Yes
 - No

4. How many adults live in your household? _____

4a. How many children and what are their ages? _____

5. Who will be the primary caregiver of this rabbit? _____

6. Does anyone in your household have allergies to pets or hay?
- Yes
 - No

7. Have you ever surrendered, sold or given away a pet?
- Yes
 - No

8. If so, what type of animal and what were the circumstances?

9. Do you currently have any other pets?

- Yes
- No

10. If so, please list:

Type	Breed	Age	Altered?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

10a. If you currently own dogs), have they been vaccinated against Bordetella (kennel cough)?

- Yes
- No

11. Do you currently own any other rabbit(s)?

- Yes
- No

12. Does your current rabbit have any medical conditions?

- Yes
- No

13. Is your current rabbit spayed or neutered?

- Yes
- No

14. Where do you plan on housing your foster rabbit i.e. cage, free roaming, indoors, outdoors?

15. Please provide details as to how you have been/will be rabbit-proofing your house or apartment.

Applicant Signature: _____ Date: _____

